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Exhibit R-2, RDT&E Budget Item Justification: PB 2019 Defense Health Agency **Date:** February 2018

Appropriation/Budget Activity 0130: Defense Health Program I BA 2: RDT&E	R-1 Program Element (Number/Name) PE 0605045DHA I Joint Operational Medicine Information System (JOMIS)
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COST (\$ in Millions)	Prior Years	FY 2017	FY 2018	FY 2019 Base	FY 2019 OCO	FY 2019 Total	FY 2020	FY 2021	FY 2022	FY 2023	Cost To Complete	Total Cost
Total Program Element	42.005	20.909	87.511	78.136	-	78.136	23.071	23.532	24.003	24.483	Continuing	Continuing
447A: Joint Operational Medicine Information System (JOMIS)	42.005	20.909	87.511	78.136	-	78.136	23.071	23.532	24.003	24.483	Continuing	Continuing

Program MDAP/MAIS Code: 521

A. Mission Description and Budget Item Justification

The JOMIS Program will modernize, deploy, and sustain the DoD's operational medicine information systems using MHS GENESIS, while developing and fielding new theater capabilities that enable comprehensive health services to meet Warfighter requirements for military medical operations. JOMIS - MHS GENESIS is intended to function in constrained, intermittent, and non-existent communications environments while providing access to authoritative sources of clinical data. The JOMIS Program is declared Joint Interest for capability requirements to be executed under the Joint Capabilities Integration and Development System (JCIDS), with oversight by the Joint Staff J8 (Force Structure, Resources and Assessments) and the Joint Requirements Oversight Council (JROC).

The JOMIS Increment 1 Program is planned to deliver the MHS GENESIS Electronic Health Record (EHR) to meet the healthcare and dental documentation requirements validated by the JCIDS approved Theater Medical Information Requirements (TMIR) Capabilities Development Document (CDD) signed February 28, 2017. JOMIS Increment 1 is planned to deliver MHS GENESIS to replace/retire the legacy AHLTA-T and TC2 systems (under TMIP-J). The JOMIS Increment 1 Program is pre-Milestone B.

<u>B. Program Change Summary (\$ in Millions)</u>	<u>FY 2017</u>	<u>FY 2018</u>	<u>FY 2019 Base</u>	<u>FY 2019 OCO</u>	<u>FY 2019 Total</u>
Previous President's Budget	22.140	87.511	22.619	-	22.619
Current President's Budget	20.909	87.511	78.136	-	78.136
Total Adjustments	-1.231	0.000	55.517	-	55.517
• Congressional General Reductions	-	-			
• Congressional Directed Reductions	-	-			
• Congressional Rescissions	-	-			
• Congressional Adds	-	-			
• Congressional Directed Transfers	-	-			
• Reprogrammings	-	-			
• SBIR/STTR Transfer	-0.808	-			
• JOMIS Realignment	-	-	55.517	-	55.517
• Other	-0.423	-	-	-	-

Change Summary Explanation

FY 2017: SBIR

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Exhibit R-2, RDT&E Budget Item Justification: PB 2019 Defense Health Agency		Date: February 2018
Appropriation/Budget Activity	R-1 Program Element (Number/Name)	
0130: Defense Health Program / BA 2: RDT&E	PE 0605045DHA / Joint Operational Medicine Information System (JOMIS)	
FY 2018: No change.		
FY 2019: Realignment from JOMIS PROC to JOMIS RDT&E.		

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Exhibit R-2A, RDT&E Project Justification: PB 2019 Defense Health Agency										Date: February 2018		
Appropriation/Budget Activity 0130 / 2					R-1 Program Element (Number/Name) PE 0605045DHA / Joint Operational Medicine Information System (JOMIS)				Project (Number/Name) 447A / Joint Operational Medicine Information System (JOMIS)			
COST (\$ in Millions)	Prior Years	FY 2017	FY 2018	FY 2019 Base	FY 2019 OCO	FY 2019 Total	FY 2020	FY 2021	FY 2022	FY 2023	Cost To Complete	Total Cost
447A: Joint Operational Medicine Information System (JOMIS)	42.005	20.909	87.511	78.136	-	78.136	23.071	23.532	24.003	24.483	Continuing	Continuing

A. Mission Description and Budget Item Justification

The purpose of the Department of Defense (DoD) Joint Operational Medicine Information Systems (JOMIS) Program is to modernize, deploy, and sustain the DoD's operational medicine information systems using MHS GENESIS Electronic Health Record (EHR), while developing and fielding new theater capabilities that enable comprehensive health services to meet Warfighter requirements for military medical operations. JOMIS is intended to function in constrained, intermittent, and non-existent communications environments while providing access to authoritative sources of clinical data. The JOMIS Program is declared Joint Interest for capability requirements to be executed under the Joint Capabilities Integration and Development System (JCIDS) and the oversight of the Joint Requirements Oversight Council (JROC).

The goals of the JOMIS Increment 1 Program are to:

- Meet existing and emerging operational medicine requirements in the theater
- Fully leverage MHS GENESIS for medical care in Theater
- Provide two way information flow between garrison and theater environments in support of a longitudinal health record

Anticipated benefits of the JOMIS Increment 1 Program include:

- Delivery of uniform clinical information across both garrison and theater environments through the use of MHS GENESIS EHR
- Enhancements to the clinical care and information captured at all levels of care in tactical environments
- Transmission of critical information to the combatant commander, the evacuation chain for combat and non-combat casualties

B. Accomplishments/Planned Programs (\$ in Millions)	FY 2017	FY 2018	FY 2019
Title: Joint Operational Medicine Information System (JOMIS)	20.909	87.511	78.136
Description: Specific contribution to mission delivery: JOMIS Increment 1 Program will serve as the primary tactical system to meet the needs of the Warfighter by enabling the provision of coordinated healthcare services. MHS GENESIS is planned to provide for key capabilities in Healthcare Services & Documentation (including Blood Management and Dental Services and Documentation. The JOMIS Increment 1 Program will also integrate MHS GENESIS for interoperability with existing Theater system capabilities for Medical Logistics, Patient Movement and Evacuation, Medical Situational Awareness and Medical Command & Control.			
FY 2018 Plans: - Continue development and integration work to integrate the MHS GENESIS Gold Disk into TMIP-J system portfolio			

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Appropriation/Budget Activity 0130 / 2				R-1 Program Element (Number/Name) PE 0605045DHA / <i>Joint Operational Medicine Information System (JOMIS)</i>				Project (Number/Name) 447A / <i>Joint Operational Medicine Information System (JOMIS)</i>			
B. Accomplishments/Planned Programs (\$ in Millions)								FY 2017	FY 2018	FY 2019	
<ul style="list-style-type: none"> - Conduct Independent Verification and Validation (IV&V), and Development Testing (DT) activities - Conduct Operational Assessment on Service platforms, and obtain Service Network Certification and Accreditation - Initiate planning activities, user readiness, user training, and change management activities for the Initial Operating Capacity (IOC) sites - Support Department of Defense Healthcare Management System Modernization (DHMSM) Program Management Office (PMO) for Contractor Testing and DT of MHS GENESIS Gold Disk <p>FY 2019 Plans:</p> <ul style="list-style-type: none"> - Complete development and integration work to integrate the MHS GENESIS Gold Disk into TMIP-J system portfolio - Begin DT - Continue planning activities, user readiness, user training, and change management activities for the IOC sites <p>FY 2018 to FY 2019 Increase/Decrease Statement:</p> <p>Slight decrease due to transitioning/development efforts (interface design and development in FY18 to test activities; integration activities planned to be funded with FY18)</p>											
Accomplishments/Planned Programs Subtotals								20.909	87.511	78.136	
C. Other Program Funding Summary (\$ in Millions)											
<u>Line Item</u>	<u>FY 2017</u>	<u>FY 2018</u>	<u>FY 2019</u> <u>Base</u>	<u>FY 2019</u> <u>OCO</u>	<u>FY 2019</u> <u>Total</u>	<u>FY 2020</u>	<u>FY 2021</u>	<u>FY 2022</u>	<u>FY 2023</u>	<u>Cost To</u> <u>Complete</u>	<u>Total Cost</u>
• BA1 0807746DHA: <i>JOMIS</i>	11.136	13.595	15.357	-	15.357	36.281	42.719	43.484	44.357	Continuing	Continuing
• BA3 0807746DHA: <i>JOMIS</i>	2.413	8.326	0.000	-	0.000	75.150	73.605	75.077	76.579	Continuing	Continuing
Remarks											
D. Acquisition Strategy											
Evaluate and use the most appropriate business, technical, contract and support strategies and acquisition approach to minimize costs, reduce program risks, and remain within schedule while meeting program objectives. Strategy is revised as required as a result of periodic program reviews or major decisions.											
E. Performance Metrics											
Each program establishes performance measurements which are usually included in the MHS IT Annual Performance Plan. Program cost, schedule and performance are measured periodically using a systematic approach. The results of these measurements are presented to management on a regular basis in various as part of the Integrated Product and Process Development (IPPD) process, In Process Reviews (IPRs), or other reviews to determine program effectiveness and provide new direction as needed to ensure the efficient use of resources.											